U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERS Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.		481340010039		3 S	
First Inventor		Dieter Schulz		jc 9	
Title	NOISE LEVE	L CALCULATOR FOR	ЕСНО	CA	NCELLER

(Only for new nonprovision	nal applications under 37 CFR 1.53(b))	Express Mail Label No. EL647232525US			
	TION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application			
1. X Fee Transmittal F (Submit an original and a Applicant claims s See 37 CFR 1.27. 3. X Specification (preferred arrangemen - Descriptive title - Cross Reference - Statement Regions - Reference to second a computer property - Background of - Brief Summary	[Total Pages 9] If set forth below) of the invention to Related Applications arding Fed sponsored R & D requence listing, a table, program listing appendix the Invention of the Invention n of the Drawings (if filed) ption Disclosure	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement X Power of (when there is an assignee) 11. English Translation Document (if applicable)			
5. Oath or Declaration a. X Newly exect Copy from a (for continual) i. DELET Signed stanamed in 1.63(d)(2) 6. X Application Data 18. If a CONTINUING APPLI	[Total Pages 2 Inted (original or copy) prior application (37 CFR 1.63 (d)) tion/divisional with Box 18 completed) ION OF INVENTOR(S) tement attached deleting inventor(s) the prior application, see 37 CFR and 1.33(b). Sheet. See 37 CFR 1.76 CATION, check appropriate box, and su	12. X Information Disclosure Statement (IDS)/PTO-1449 13. Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. X Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. X Other: Check. # 1005738 for \$710; see the requisite information below and in a preliminary amendment,			
or in. an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No:/					
Customer Number or Bar Co	THE HELDES	or Correspondence address below			
Name	David B. Cochran, Esq.				
Address City Country	Jones, Day, Reavis & Pogue 901 Lakeside Avenue/North Point Cleveland State OH Zip Code 44114 USA Telephone 216-586-7029 Fax 216-579-0212				
Name (PrintlType)	David B. Cochran	Registration No. (Attorney/Agent) 39,142			
Signature	David B.	Och Date 9/28/01			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
o a collection of information unless it displays a valid OMB control number. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of infor

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

۲۱.	710	00
5)	710	• UU

er and the second of the matter and the second of the seco				
Complete if Known				
Application Number				
Filing Date				
First Named Inventor	Dieter Schulz			
Examiner Name				
Group Art Unit				
Attorney Docket No.	481340010039			

METHOD OF PAYMENT	FEE CALCULATION (continued)				
1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	3. ADDITIONAL FEES				
Deposit (please reference)	Large Small Entity Entity				
Account Number 501432 481340010039)	Fee Fee Fee Fee Pescription	Fee Paid			
Deposit Account Longe Deve Beauty S. D.	code (\$) code (\$)	Teeralu			
Name Jones Day Reavis & Pogue	105 130 205 65 Surcharge - late filing fee or oath				
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet				
Applicant claims small entity status.	139 130 139 130 Non-English specification				
See 37 CFR 1.27 2. X Payment Enclosed:	147 2,520 147 2,520 For filing a request for ex parte reexamination				
□ Charle □ County □ Money □	112 920* 112 920* Requesting publication of SIR prior to Examiner action				
Order Other	113 1,840* 113 1,840* Requesting publication of SIR after				
FEE CALCULATION	Examiner action				
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month				
Large Entity Small Entity Fee Fee Fee Fee Description	116 390 216 195 Extension for reply within second month				
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 890 217 445 Extension for reply within third month				
101 710 201 355 Utility filing fee 710	118 1,390 218 695 Extension for reply within fourth month				
106 320 206 160 Design filing fee	128 1,890 228 945 Extension for reply within fifth month				
107 490 207 245 Plant filing fee	119 310 219 155 Notice of Appeal				
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal				
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing				
SUPTOTAL (4) (ft) 710	138 1,510 138 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) 710	140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES Fee from	141 1,240 241 620 Petition to revive - unintentional				
Extra Claims below Fee Paid	142 1,240 242 620 Utility issue fee (or reissue)				
Total Claims 4 -20** = 0 X 0 = 0	143 440 243 220 Design issue fee				
Claims	144 600 244 300 Plant issue fee				
Multiple Dependent = 0	122 130 122 130 Petitions to the Commissioner				
Lorgo Entitu O II F	123 50 123 50 Processing fee under 37 CFR 1.17(q)				
Large Entity Small Entity Fee Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt				
Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per				
103 18 203 9 Claims in excess of 20	property (times number of properties)				
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(a))				
104 270 204 135 Multiple dependent claim, if not paid 109 80 209 40 ** Reissue independent claims	149 710 249 355 For each additional invention to be				
109 80 209 40 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))				
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Continued Examination (RCE)				
and over original patent	169 900 169 900 Request for expedited examination				
SUBTOTAL (2) (\$) ()	of a design application Other fee (specify)				
(_/					
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0				

SUBMITTED BY Complete (if applicable)				applicable)	
Name (Print/Type)	David B. Cochran	Registration No.	39,142	Telephone	216-586-7029
Signature	David B. (och		Date	9/08/11

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.